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CONFIRMATION NO. 2521

<b>SERIAL NUMBER</b> 10765,380	<b>FILING OR 371(c) DATE</b> 01/26/2004 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> 017534-000740US
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 09/898,703 07/02/2001 PAT 6,709,401 which is a DIV of 09/347,032 07/02/1999 PAT 6,287,290 ✓ *12/21/04*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none @ 12/21/04*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\*  
 05/01/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 16	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
Verified and Acknowledged	<i>Patricia Cyphers</i> Examiner's Signature Initials				

## ADDRESS

20350

## TITLE

Methods, systems, and kits for lung volume reduction

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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